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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Tsuyoshi TAMURA

Group Art Unit: 2674

Application No.: 09/911,829

Examiner: K. Nguyen

Filed: July 25, 2001

Docket No.: 110196

For: RAM-INCORPORATED DRIVER, AND DISPLAY UNIT AND ELECTRONIC
EQUIPMENT USING THE SAME

AMENDMENT UNDER 37 C.F.R. §1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED
SEP 15 2004
Technology Center 2600

Sir:

In reply to the June 14, 2004 Office Action, please consider the following:

Amendments to the Claims as reflected in the listing of claims; and

Remarks.

09/13/2004 SDIRETAL 00000021 09911829

01 FC:1202

108.00 OP

OLIFF & BERRIDGE, PLC
Telephone: (703) 836-6400
Facsimile: (703) 836-2787



PATENT APPLICATION

Attorney Docket No.: 110196

CUSTOMER NUMBER 25944

AMENDMENT TRANSMITTAL

In re the Application of

Tsuyoshi TAMURA

Group Art Unit: 2674

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.
☐ Small entity status of this application has been established.

The filing fee has been calculated as shown below:

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE		RATE	ADD'L FEE
TOTAL CLAIMS	*32 MINUS	**26	=6	x 9	\$	OR	x 18	\$ 108
INDEP CLAIMS	*3 MINUS	***3	=0	x 43	\$		x 86	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 145	\$	OR	+290	\$
					\$			\$ 108

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.


** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 158293 in the amount of \$108 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,


James A. Oliff
Registration No. 27,075

Scott M. Schulte
Registration No. 44,325

JAO:SMS/sxb

Date: September 10, 2004